**AMENDMENT TRANSMITTAL LETTER** (Large Entity)

Applicant(s): Pamela A. Kramer

Docket No.

**50623.452**

Serial No.

**09/880,514**

Filing Date

**June 12, 2001**

Examiner

**Sandra M. Nolan**

Group Art Unit

**1772**

Invention:

Method And Apparatus For Thermal Spray Processing Of Medical Devices

**TO THE COMMISSIONER FOR PATENTS:**

Transmitted herewith is an amendment in the above-identified application.

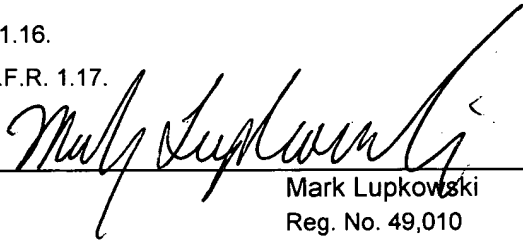
The fee has been calculated and is transmitted as show below.

**CLAIMS AS AMENDED**

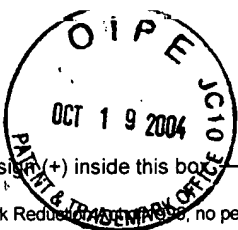
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	50	43	7	X \$18.00	\$126.00
INDEP. CLAIMS	13	9	4	X \$86.00	\$344.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$00.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$470.00

- ☐ No additional fee is required for amendment.
- ☒ Please charge Deposit Account No. **07-1850** in the amount of **\$470.00**  
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of any necessary fees associated with this communication or credit any overpayment to Deposit Account No. **07-1850**  
A duplicate copy of this sheet is enclosed.
- ☐ Any additional filing fees required under 37 C.F.R. 1.16.
- ☐ Any patent application processing fees under 37 C.F.R. 1.17.

Dated: October 19, 2004  
Squire, Sanders & Dempsey L.L.P.  
1 Maritime Plaza, Suite 300  
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(415) 954-0200

  
Mark Lupkowski  
Reg. No. 49,010

cc: Docket:



10-21-04

1772

Please type a plus sign (+) inside this box ☐

PTO/SB/21 (08-03)

Approved for use through 08/30/03. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	<b>Application Number</b>	09/880,514	
	<b>Filing Date</b>	June 12, 2001	
	<b>First Named Inventor</b>	Pamela A. Kramer	
	<b>Group Art Unit</b>	1772	
	<b>Examiner Name</b>	Sandra M. Nolan	
<b>Total Number of Pages in This Submission (excluding references)</b>	20	<b>Attorney Docket Number</b>	50623.00452

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization	<input checked="" type="checkbox"/> Assignment Papers (3 pages) (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Postage Paid Return Postcard	<input type="checkbox"/> Drawing(s) In/Formal ___ Sheets with Submission of Drawings Transmittal	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Response (17 pages)	<input type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate)	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> Amendment Transmittal Letter (in duplicate)	<input type="checkbox"/> Request for Continued Examination Transmittal (RCE)	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Fee Transmittal Form (in duplicate)	<input type="checkbox"/> Request for Status of Application
<input type="checkbox"/> Petition for Extension of Time (___ month) (in duplicate)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Information Disclosure Statement (in duplicate) with Form PTO-1449 and ___ References	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Express Mail Label No. Ev 337 976 724	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) ____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Mark Lupkowski, Reg. No.49,010
Signature	
Date	October 19, 2004

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Mail Stop Amendments, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: October 19, 2004			
Typed or printed name	Patricia Gamble		
Signature		Date	October 19, 2004